



PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re the Application of

Takashi NAGASHIMA et al.

Application No.: 10/802,944

Filed: March 18, 2004

Docket No.: 119154

For: LIGHT PEN AND PRESENTATION SYSTEM HAVING THE SAME

SUBMISSION OF SUBSTITUTE DECLARATION

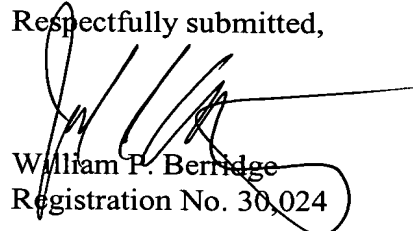
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Submitted herewith is a fully executed Substitute Declaration of the Inventors. Entry of this document should resolve any informalities in the original Declaration.

It is respectfully submitted that no additional fees are required for the substitute Declaration. However, the Commissioner is hereby authorized to charge any additional fee associated with this communication to deposit account number 15-0461.

Respectfully submitted,

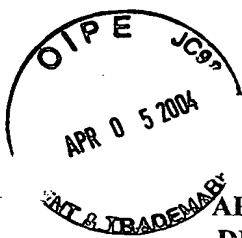

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WPB:JSA/emt

Date: April 5, 2004

OLIFF & BERRIDGE, PLC
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Docket No.: 119154**APPLICATION FOR UNITED STATES PATENT
DECLARATION AND POWER OF ATTORNEY**

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name; that

I verily believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: _____

LIGHT PEN AND PRESENTATION SYSTEM HAVING THE SAME

described and claimed in the specification:

Check one

*a. ☐ attached hereto.b. ☒ filed on March 18, 2004 as Application No. _____ and amended on _____ (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose to the Office all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations, §1.56.

Under Title 35, U.S. Code §119, the priority benefits of the following foreign application(s) and/or United States provisional application(s) filed within one year prior to this application are hereby claimed:

Japanese Patent Application No.2003-087542 filed on March 27,2003.

The following application(s) for patent or inventor's certificate on this invention were filed in countries foreign to the United States of America either (a) more than one year prior to this application, or (b) before the filing date of the above-named foreign priority application(s) and/or United States provisional application(s):

I hereby appoint the following as my attorneys of record with full power of substitution and revocation to prosecute this application and to transact all business in the Patent Office:

James A. Oliff, Reg. No. 27,075; William P. Berridge, Reg. No. 30,024;
Kirk M. Hudson, Reg. No. 27,562; Thomas J. Pardini, Reg. No. 30,411;
Edward P. Walker, Reg. No. 31,450; Robert A. Miller, Reg. No. 32,771 and
Mario A. Costantino, Reg. No. 33,565.**ALL CORRESPONDENCE IN CONNECTION WITH THIS APPLICATION SHOULD BE SENT TO OLIFF & BERRIDGE,
PLC, P.O. BOX 19928, ALEXANDRIA, VIRGINIA 22320, TELEPHONE (703) 836-6400.**

I hereby declare that I have reviewed and understand the contents of this Declaration, and that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

1 **Typewritten Full Name
of First or Sole Inventor**TakashiNAGASHIMA

Given Name

Middle Initial

Family Name

2 ****Inventor's Signature:**TakashiNagashima3 ****Date of Signature:**March152004

Month

Day

Year

Residence:

SaitamaSaitamaJapan

City

State or Province

Country

Citizenship:

JapanesePost Office Address:
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mailing address,
including country)c/o FUJI PHOTO OPTICAL CO., LTD.,324, Uetakecho 1-chome, Kita-ku, Saitama-shi, Saitama 331-9624 Japan

*If Box (a.) is checked, this form may be executed only when attached to the specification (including claims).

**Note to Inventor: Please sign name exactly as it appears above and insert actual date of signing.

IF THERE IS MORE THAN ONE INVENTOR USE PAGE 2 AND PLACE AN "X" HERE ☒

PAGE 2 OF U.S.A. DECLARATION FORM
(Discard this page in a sole inventor application)

1	Typewritten Full Name of Second Joint Inventor (if any)	<u>Mitsuyoshi</u>	<u></u>	<u>NISHIMURA</u>
		Given Name	Middle Initial	Family Name
2	**Inventor's Signature:	<u>Mitsuyoshi</u>	<u></u>	<u>Nishimura</u>
3	**Date of Signature:	<u>March</u>	<u>15</u>	<u>2004</u>
		Month	Day	Year
	Residence:	<u>Saitama</u>	<u>Saitama</u>	<u>Japan</u>
		City	State or Province	Country
	Citizenship:	<u>Japanese</u>		
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1	Typewritten Full Name of Third Joint Inventor (if any)	<u></u>	<u></u>	<u></u>
		Given Name	Middle Initial	Family Name
2	**Inventor's Signature:	<u></u>	<u></u>	<u></u>
3	**Date of Signature:	<u></u>	<u></u>	<u></u>
		Month	Day	Year
	Residence:	<u></u>	<u></u>	<u></u>
		City	State or Province	Country
	Citizenship:	<u></u>		
	Post Office Address: (Insert complete mailing address, including country)	<u></u>		

1	Typewritten Full Name of Fourth Joint Inventor (if any)	<u></u>	<u></u>	<u></u>
		Given Name	Middle Initial	Family Name
2	**Inventor's Signature:	<u></u>	<u></u>	<u></u>
3	**Date of Signature:	<u></u>	<u></u>	<u></u>
		Month	Day	Year
	Residence:	<u></u>	<u></u>	<u></u>
		City	State or Province	Country
	Citizenship:	<u></u>		
	Post Office Address: (Insert complete mailing address, including country)	<u></u>		

1	Typewritten Full Name of Fifth Joint Inventor (if any)	<u></u>	<u></u>	<u></u>
		Given Name	Middle Initial	Family Name
2	**Inventor's Signature:	<u></u>	<u></u>	<u></u>
3	**Date of Signature:	<u></u>	<u></u>	<u></u>
		Month	Day	Year
	Residence:	<u></u>	<u></u>	<u></u>
		City	State or Province	Country
	Citizenship:	<u></u>		
	Post Office Address: (Insert complete	<u></u>		